

# SOCIAL WORK SERVICES MANUAL

## **Mission Statement:**

To provide excellent in-patient psychiatric care.

## **INTRODUCTION**

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The Utah State Hospital had its beginning in 1885 under the name Territorial Insane Asylum. Since its "asylum" years, the hospital has grown and developed into a treatment facility with emphasis and respect for the dignity and worth of the emotionally disturbed patient.

The Utah State Hospital utilizes the unit system and has several specialty unit teams. Rather than functioning as a centralized department, social work services are delivered by social workers assigned to unit treatment teams, with the unit Clinical Director (psychiatrist) and unit Administrative Director having primary responsibility for the supervision and direction of that team. The social worker joins with unit team members in clinical staffing and other treatment - focused meetings and contributes his/her unique skills in the formulation and implementation of treatment plans.

## **DELIVERY OF SOCIAL WORK SERVICES**

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The delivery of social work services is accomplished through utilization of the traditional social work methods: Individual psychotherapy, group psychotherapy, family therapy, utilizing community resources, research, and administration. Some social workers are involved in the provision of specialized services as indicated by the needs of their patient or target population. All patients have an assigned social worker.

### **A. Role and Responsibility:**

#### **1. Intake, History-Taking and Admission Responsibilities**

The social workers participate with other mental health professionals in the intake process. This involves taking the social history, contacting and collaborating with community resources, discussion of possible discharge options and interpretation of the treatment program to the patient and his/her family.

#### **2. Staffing, Diagnosis and Treatment Goals**

The social worker joins with other unit team members in clinical staffing and other treatment-focused meetings and contributes his/her unique skills in the formulation of diagnosis and treatment plans. A list of treatment goals and objectives are arrived at in clinical staffing and are recorded on the Individual Comprehensive Treatment Plan (ICTP).

#### **3. Discharge Planning and Follow-up**

Social workers have a responsibility for developing, with the unit treatment team, the patient and his/her family, ADT, and the Mental Health Center discharge plans and out-patient follow-up services. This involves numerous community and agency contacts. USH Clinical Team will contact MHC liaisons or case managers. The social work staff provides some follow-up services but

increasingly utilizes and works with the local community mental health center serving the geographic area in which the released patient resides.

4. Role of the Social Worker

All social workers at USH have MSW degrees and are licensed in the State of Utah as Certified Social Workers or Licensed Clinical Social Workers and act as a Clinical Therapist for 7 - 15 patients. Recognizing that the Clinical Director is responsible for the overall treatment of all the patients on the unit, the role of the social worker varies from unit to unit, but in general they work with the team in providing services to the patients in the following areas of responsibility:

- A. Provide psychotherapy to each patient assigned to him/her.
- B. Development of the social work components of the patient's individualized comprehensive treatment plan (ICTP).
- C. Participate in decisions regarding visits, passes, and other day-to-day decisions to assure that the patient receives individualized treatment.
- D. Document social work interventions and patient progress in meeting the ICTP goals and objectives.
- E. Maintain regular contact with the patient's family or interested others, as consented to by the patient, as well as offer and/or provide family therapy if clinically indicated.
- F. Maintain regular contact and collaboration with referring agencies and other professional personnel and agencies to ensure proper coordination of services for the patient occurs.
- G. Coordinate discharge planning with the patient, family, interested others, involved agencies, and the referring community mental health center to ensure continuity of patient care. Discharge planning will be in accordance with current policy 12 guidelines.
- H. Because of the hospital's specialization, the philosophy treatment, and programming may differ from one unit to another. Recognizing the various mental health needs within the State of Utah, some units have specialized in certain psychiatric treatment areas, i.e., children, youth, forensic, general adult psychiatric, and adults with special needs (geriatric).

## **SOCIAL WORK TREATMENT**

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Social workers at USH are primarily responsible for the delivery of psychotherapy services to the patients. These services are given by using three modalities:

1. Group Psychotherapy

Group psychotherapy is an important modality used by social

workers with their patients. Treatment groups are divided into three categories:

- A. Core - all patients on the unit must attend.
- B. Target - deals with specific issues related to the patients who attend.
- C. Elective - are optional to patients depending on their treatment plan goals and objectives as well as their personal desires.

Treatment groups may take various approaches such as the traditional groups (4-7 patients) which could be focus groups (depression, stress reduction, cognitive enhancement, etc.), community groups (a meeting of all the patients on the unit), family groups (members of a family meet together), marital groups (one or more marital couples meet), etc.

2. Individual Psychotherapy

Individual psychotherapy would include various models of intervention such as cognitive behavioral, solution focused, humanistic, reflective-supportive, etc. All are designed and used to assist patients to better understand and cope with the debilitating effects of mental illness.

3. Family Therapy

When appropriate and possible, family therapy is used to assist all members to better understand and deal with the mental illness their relative patient is experiencing. Flexibility is needed as well as innovative thinking and methodology to appropriately assist some families. One example is the use of Family Day, a quarterly meeting held on Saturdays where families are invited to USH for educational classes and interactive involvement with their relative patients.

## **LINES OF RESPONSIBILITY**

Rather than functioning as a centralized department, Social Work Services are delivered by social workers assigned to unit treatment teams with the unit Clinical Director (psychiatrist) and Administrative Director having primary responsibility for supervision and direction of that team. Any social work problems not resolved at that level are referred to the Director of Social Work Services.

There is an organized Social Work Services Department with a full-time Director of Social Work Services.

A. Responsibilities of the Director of Social Work Services:

The Director of Social Work Services has primary responsibility in the following areas:

- 1. Responsible for the coordination of social work services throughout the hospital.
- 2. Acts as social work representative to the hospital administration.
- 3. Acts as a consultant or resource person to other social workers within the hospital.
- 4. Directs and assists the unit team and hospital Human Resources

Department in the recruitment, interviewing, and hiring of new social work personnel.

5. Coordinates, with the unit Administrative Director, the quarterly job performance appraisal of social workers within the hospital.
6. Is responsible for the agenda and conducting of the monthly social work discipline meetings.
7. Assumes liaison responsibilities with the University of Utah and the Brigham Young University relative to the placement and supervision of graduate and undergraduate social work students.
8. Responsible for the Continuous Quality Improvement program and follow-up as it pertains to social work.

B. Clinical Supervision

All social workers at USH are expected to have or be working toward the Licensed Clinical Social Worker (LCSW) certification. When a Certified Social Worker (CSW) is hired, a properly licensed colleague will be assigned to be a clinical supervisor until the LCSW is obtained. This supervisor will have a clinical responsibility but no line authority over the CSW. That authority will be maintained by the Administrative Director and Clinical Director on the unit as well as the Director of Social Work Services. The clinical supervisor (LCSW) is to provide assistance, consultation, and review of clinical work performed by the CSW. The overall purpose is to increase high quality performance and outcomes in all clinical areas, i.e. Social Histories, ICTP's, documentation, and therapy skills.

C. Lead Social Worker

Where and when appropriate, Lead Social Workers will be assigned on various units by the Director of Social Work Services in consultation with the unit Administrative Director. This position will exist when necessary to assist the Director of Social Work Services with matters related to the discipline.

## **POLICIES AND PROCEDURES**

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A. Social Work Services Manual

The social service manual contains the policies and procedures for the provision of social work within the hospital. The manual is helpful in orienting new social work employees to the hospital. The manual is reviewed and updated periodically. A Social Work Annual Report is submitted to the hospital administration, including the status of social work services within the hospital.

B. Social Work Services - Unit Focused

Because of the organization of the hospital and the provision of specialized services, social workers operate within the developed philosophies of their particular unit. Each unit is responsible for developing its own programming approach for treating its patients.

C. Legal Requirements

State law requires the licensing of all social service personnel to insure

high standards of practice. All social workers at USH must possess a current license from the State of Utah, Department of Commerce, Division of Occupational and Professional Licensing, as a Certified Social Workers or Licensed Clinical Social Worker.

- D. **Patient and Family Evaluations**  
Upon admission, the patient, and his/her family when possible, are involved in an evaluation process which includes orientation to the hospital, gathering information for a social history, assessment of family and community resources, treatment recommendations, discharge plans for the future, etc. This process continues while the individual is a patient at USH.
- E. **Treatment with Individuals and Groups**  
Individual, group, and family therapy is provided on all units of the hospital. Each unit team determines the type and frequency of the therapy according to the treatment needs of the patient.
- F. **Program Evaluation**  
Social workers participate in program evaluation and modification on their units, in social work service discipline meetings, and in hospital-wide meetings. Social workers join with administrative personnel through such means as unit conferences and the Hospital Executive Staff in evaluating and updating treatment programs.
- G. **Consultation and Training Services**  
It is a social work service policy to be actively involved in consultation and collaborative services as they relate to better services to patients and their families. Social workers are involved in various committees relating to social issues within the community and state. Collaboration occurs with numerous agencies such as the Division of Child and Family Services, the Juvenile and District Courts, Vocational Rehabilitation, School Districts, etc.
- H. **Social Worker Selection Process**  
The recruitment, interviewing, and hiring of prospective social work staff is the joint responsibility of hospital human resources, the individual unit team, and the Director of Social Work Services.  
All social work positions are filled by people with masters degrees in social work. All social workers at USH must have a CSW or LCSW license as granted by the State of Utah, Department of Commerce, Division of Occupational and Professional Licensing.
- I. **Community Services**  
Social workers have responsibility for developing, with the unit treatment team, the patient, and his/her family, community discharge plans and outpatient follow-up services. These plans are coordinated through ADT office. However, the follow-up is done by the local community mental health centers serving the geographic area in which the released patient resides. There is considerable collaboration between the agencies in the interest of the patient.
- J. **Social Work Services Staff Meetings**

The social work service staff meets on the first Thursday of each month. Matters relating to the overall functioning of the hospital are discussed, and more specifically, topics that relate directly to social work responsibilities. The focus of the monthly social work service staff meeting is evaluated frequently and is subject to redirection as the needs of the staff, units, and total hospital dictate. Many of these meetings will be utilized for professional social work education. Attendance roles and minutes of each meeting are kept.

K. Records

1. Administrative Records

Administrative records, i.e., those pertaining to budget, finances, equipment and supplies, are kept in the hospital business office under the direction of the Hospital Business Administrator.

2. Personnel Records

Social work personnel records are kept by unit secretaries in regard to vacation time, compensatory time, sick time, etc. All other personnel information and evaluations are kept in the Hospital Human Resource Department. Records are readily available as needed by authorized hospital personnel and may be reviewed by the individual social worker.

3. Statistical Records

Patient statistical records are kept in the Hospital Medical Records Department and are available to social workers for information, research, and evaluation purposes.

L. Continuing Education and Inservice Training

USH expects social workers to maintain their professional licences and certifications. Therefore, social workers are encouraged to attend appropriate workshops, seminars, and conferences at USH and within the State of Utah where continuing education units (CEU's) are offered. The budgetary issues for payment of seminar registration are connected to the units to which the social workers are assigned.

M. Community Education

Social workers at USH are actively engaged in giving talks to community groups relative to hospital and treatment programs, as well as the provision of social work services. Several of the social workers employed at the hospital have served as part-time instructors for the school of Social Work at Brigham Young University and are field instructors for graduate students from the Graduate Schools of Social Work at Brigham Young University and the University of Utah.

N. Office Space and Equipment

Adequate office space is provided on each unit for professional, clinical and clerical staff. Staff offices are located on the treatment units and are openly accessible to patients and their families. There are available storage rooms, observation rooms, interviewing rooms, conference rooms, and group rooms. Play therapy rooms are available on the Youth and Children's units as well as craft and hobby areas on all units.

Research, library, and data analysis equipment is available in the administration building. Computer equipment and office supplies are provided on each unit.

O. Referral Procedure

Social work service needs are met by the hospital social work services staff, and it is not necessary to contract for outside services. The social worker assists in coordinating referrals for specialty services, i.e., vocational rehabilitation, occupational therapy, psychological testing, and medical services are available at USH or on a consultative basis.

## **STAFF DEVELOPMENT AND TRAINING PROGRAMS**

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Social work service staff meetings are held at least monthly. In these meetings, matters are discussed which relate to the social work discipline as well as how the discipline functions overall within the hospital. When appropriate, professionals from other disciplines at the hospital are invited to cover material that will help social workers better treat their patients. On other occasions, professionals from the community present on subjects that will enhance the social workers' knowledge and expertise in areas of patient treatment.

All newly hired social workers must complete New Employee Orientation coordinated by the Human Resource office personnel. In addition, new social workers receive orientation from the unit on which they work as well as from the Director of Social Work. Orientation of new social workers is a joint effort. Also, each social worker is required to successfully complete classes held annually during Mandatory Employee Training week which updates knowledge and skills related to employment at USH.

All social workers are expected to provide supervision, if called upon, to BSW and MSW interns from Brigham Young University and second year interns from the University of Utah. All who supervise interns must be approved by these Universities by attending a training course provided by them. This is keeping with the expectation of the Council on Social Work Education (CSWE).

## **DOCUMENTATION AND RECORDS**

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In recognition of the importance of accurate records and to insure continuity of patient care, social workers along with other team members are involved in contributing to the medical record in the following ways:

- A. Initial Assessment (IA)
  - 1. The Social History portion of Integrated Assessment
- B. Individual Comprehensive Treatment Plan (ICTP)
  - 1. Patient and family input
  - 2. Ongoing discharge plan
  - 3. Assessment of patient progress and strengths
  - 4. Objectives and modalities related to social work services
- C. Ongoing Social Work Notes
  - Progress notes are done at least weekly for the first eight weeks

following patient admission and monthly thereafter.

Progress notes as they relate to:

1. Individual Therapy
2. Group Therapy
3. Family Therapy
4. Outpatient Community Contacts

D. Discharge Summary

1. Follow up treatment to be coordinated by the community mental health center
2. Problems unresolved and treatment recommendations
3. Assessment of patient's ability to participate in future treatment planning

## **CONFIDENTIALITY**

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Social workers are informed of and enforce the fact that patient medical record information is confidential. The patient record is the property of the hospital and is maintained for the benefit of the patient, clinical staff, and the hospital. It is the responsibility of the hospital to safeguard the information in the record against loss, defacement, tampering, or use by unauthorized individuals. The information contained in the patient medical record belongs to the patient, and the patient is entitled to the protected right of information. Except as provided by law, proper written consent of the patient or his/her legal representative is required for release of patient information. Patients are informed of the hospital's policies regarding confidentiality.

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